

AMENDMENT TRANSMITTAL LETTER			Docket No. FLH-11002/29	
Application No. 10/805,856-Conf. #1720	Filing Date March 22, 2004	Examiner L. Bachman	Art Unit 3734	
Applicant(s): Mark Falahee				
Invention: WOUND AND SKIN CLOSURE INSTRUMENT AND METHOD OF USE				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	3	- 20 =		x
Independent Claims	1	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within first month				60.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				60.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. <u>07-1180</u> in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ <u>60.00</u> to cover the filing fee is enclosed.				
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>07-1180</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
_____ John G. Posa Attorney/Agent Reg. No.: 37,424			Dated: <u>June 6, 2007</u>	
GIFFORD, KRASS, SPRINKLE, ANDERSON & CITKOWSKI, P.C. 2701 Troy Center Drive, Suite 330 Post Office Box 7021 Troy, Michigan 48007-7021 (734) 913-9300				